

**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**  
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**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
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**Label No.**  
**EV961695385US**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

28785 7590 03/15/2007  
**JOHN R LEY, LLC**  
**5299 DTC BLVD, SUITE 610**  
**GREENWOOD VILLAGE, CO 80111**



**Certificate of Mailing or Transmission** **express**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for ~~first class~~ mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

04/04/2007 BABRAHA2 00000047 10628860

01 FC:2501 700.00 OF  
02 FC:1504 300.00 OF  
03 FC:8001 6.00 OF

Connie Bursey	(Depositor's name)
<i>Connie Bursey</i>	(Signature)
April 3, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/628,860	07/28/2003	Joseph S. Bieganeck	249.303	3850

TITLE OF INVENTION: CONTOURED SEAT CUSHION AND METHOD FOR OFFLOADING PRESSURE FROM SKELETAL BONE PROMINENCES AND ENCOURAGING PROPER POSTURAL ALIGNMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	06/15/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAFAVI, MICHAEL	3673	005-630000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  
1 John R. Ley  
2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Aspen Seating, LLC**

**Sheridan, Colorado**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 2

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☒ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 121087 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *John R. Ley*  
Typed or printed name John R. Ley

Date April 3, 2007  
Registration No. 27,453

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PATENT  
Attorney Docket No. 249.303  
Express Mail Label No. EV961695385US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	
Joseph S. Bieganeck, et al.	)	Group Art Unit: 3673
	)	Examiner: Safavi, Michael
Serial No. 10/628,860	)	
	)	Class-Subclass: 005-630000
Filed: July 28, 2003	)	Confirmation No. 3850
	)	
For: Contoured Seat Cushion and Method	)	Date of Notice of Allowability:
for Offloading Pressure from Skeletal	)	March 15, 2007
Bone Prominences and Encouraging	)	
Proper Postural Alignment	)	

**CERTIFICATE OF MAILING BY EXPRESS MAIL**

MAIL STOP ISSUE FEE  
Director of the U.S. Patent and Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The undersigned hereby certifies that the attached Issue Fee Transmittal Letter; Part B - Fee(s) Transmittal; Fee Address Indication Form; Check in the Amount of \$1,006 (\$1,000 in payment of the Issue and Publication Fees, \$6 in payment for advance order of 2 patent copies at \$3 per copy); Certificate of Mailing by Express Mail; and Return Card, relating to the above application, were deposited as "Express Mail," Mailing Label No. EV961695385US, with the United States Postal Service, addressed to MAIL STOP ISSUE FEE, Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, on April 3, 2007.

4-3-07  
Date

4-3-07  
Date

Customer No. 28785

Donnie Bursey  
Mailer

John R. LEY  
Registration No. 27,453  
ATTORNEY FOR APPLICANT

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PATENT  
Attorney Docket No. 249.303  
Express Mail Label No. EV961695385US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	
Joseph S. Bieganeck and	)	Group Art Unit: 3673
Thomas R. Hetzel	)	
	)	Examiner: Safavi, Michael
Serial No. 10/628,860	)	
	)	Class-Subclass: 005-630000
Filed: July 28, 2003	)	Confirmation No. 3850
	)	
For: Contoured Seat Cushion and Method	)	Date of Notice of Allowability:
for Offloading Pressure from Skeletal	)	March 15, 2007
Bone Prominences and Encouraging	)	
Proper Postural Alignment	)	

ISSUE FEE TRANSMITTAL LETTER

MAIL STOP ISSUE FEE  
Director of the U.S. Patent and Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

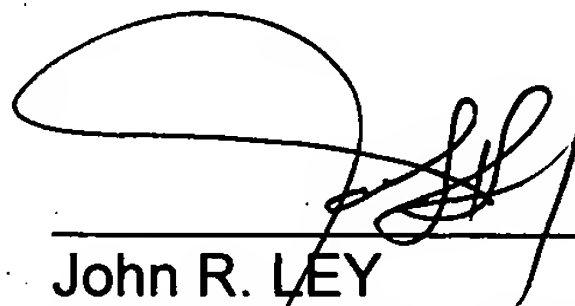
Enclosed herewith are the following documents in connection with the payment of the outstanding Issue Fee due in the captioned application:

1. Part B - Fee(s) Transmittal;
2. Fee Address Indication Form;
3. Check in the Amount of \$1,006 (\$1,000 in payment of the Issue and Publication Fees, \$6 in payment for advance order of 2 patent copies at \$3 per copy);
4. Certificate of Mailing by Express Mail; and
5. Return Card.

The Commissioner is hereby authorized to charge any deficiencies in the enclosed fees or to credit any overpayment thereof to the Deposit Account of the undersigned attorney, Deposit Account No. 12-1087.

Dated at Greenwood Village, Colorado, this 3<sup>rd</sup> day of April, 2007.

Respectfully submitted,



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John R. LEY  
Registration No. 27,453  
ATTORNEY FOR APPLICANT

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